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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			Docket Number (Optional)	
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			005822.P001	
Application Number 10/033657			Filed 12/27/2001	
For METHOD AND APPARATUS FOR XML SCHEMA PUBLISHING INTO A USER INTERFACE				
Art Unit 2174			Examiner Ryan F. Pitaro	
This is a rea	quest under the provisions of 37 CFR 1.13	36(a) to extend the perio	od for filing a reply in th	e above identified
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
		<u>Fee</u>	Small Entity Fee	
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
\checkmark	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	§ <u>510</u>
	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
	Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR 1.27.				
A check in the amount of the fee is enclosed.				
Payment by credit card. Form PTO-2038 is attached.				
The Director has already been authorized to charge fees in this application to a Deposit Account.				
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to				
Deposit Account Number I have enclosed a duplicate copy of this sheet. WARNING: Information on this form may become public. Credit card information should not be included on this form.				
Provide credit card information and authorization on PTO-2038.				
I am the applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).				
	attorney or agent of record. R			
	attorney or agent under 37 C Renistration number if acting und Digitally signed by	der 37 CFR 1.34		
		eimlich, C = US, O =	05/27/2005	
Signature			Date	
Alan Heimlich			408 253 3860	
Typed or printed name			Telephone Number	
NOTE: Signate	ures of all the inventors or assignees of record of the quired, see below.	entire interest or their represen	ntative(s) are required. Submi	t multiple forms if more than one
Total of 1 forms are submitted.				